

|                        |  |
|------------------------|--|
| NO. OF COPIES RECEIVED |  |
| DISTRIBUTION           |  |
| SANTA FE               |  |
| FILE                   |  |
| U.S.G.S.               |  |
| LAND OFFICE            |  |
| OPERATOR               |  |

# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

|  |
|--|
| 5a. Indicate Type of Lease   |
| State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.   |
| B 2516   |

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

|  |                                |
|--|--------------------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 7. Unit Agreement Name         |
| 2. Name of Operator  | 8. Farm or Lease Name          |
| Southland Royalty Company  | State "A"                      |
| 3. Address of Operator   | 9. Well No.                    |
| 1100 Wall Towers West, Midland, Texas 79701  | 5                              |
| 4. Location of Well  | 10. Field and Pool, or Wildcat |
| UNIT LETTER F 1980 FEET FROM THE West LINE AND 1980 FEET FROM  | Maljamar G-SA                  |
| THE North LINE, SECTION 8 TOWNSHIP 17-S RANGE 33-E NMPM.   |                                |
| 15. Elevation (Show whether DF, RT, GR, etc.)  | 12. County                     |
| N.A.   | Lea                            |

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

|  |   |
|--|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            |

SUBSEQUENT REPORT OF:

|  |   |
|--|---|
| REMEDIAL WORK <input type="checkbox"/>               | ALTERING CASING <input type="checkbox"/>      |
| COMMENCE DRILLING OPNS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input checked="" type="checkbox"/>     |
| Bradenhead Tie In                                    |   |

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Tied Bradenhead to Surface With Valve Exposed.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED C. Harvey TITLE District Engineer DATE 2-15-79

APPROVED BY M. J. [Signature] TITLE OIL & GAS INSPECTOR DATE MAR 13 1979

CONDITIONS OF APPROVAL, IF ANY: